PATENT APPLICATION SERIAL NO. 10/588183

U.S. DEPARTMENT: OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

TO LIVER STORES OF STREET STORE

08/10/2006 MKAYPAGH 00000166 10588183

01 FC:1631 300.00 DA 02 FC:1632 500.00 DA 03 FC:1633 200.00 DA

Adjustment date: 04/20/2007 SAHMED1 08/10/2006 MKAYPAGH 00000166 194675 10588183 02-FC:1632 500.00 CR

04/20/2007 SAHMED1 00000001 194675 10588183

01 FC:1642 400.00 DA

PTO-1556 (5/87)

U.S. Government Patreng Office: 2007 - 440-767/90019

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/588183

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
<u></u>	MATIONAL ((Col	lumn 1)		Column 2)	,			7 7	SWALL E	:NIII T	
U.S. NATIONAL STAGE FEES					<u> </u>]	RATE	FEE]	RATE	FEE	
BASIC FEE			<u> </u>					BASIC FEE	<u> </u>	OR	BASIC FEE	300	
EXAMINATION FEE					<u> </u>			EXAM, FEE			EXAM. FEE	200	
SEARCH FEE								SEARCH FEE			SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			n	ninus 100 =		/ 50 =] [X \$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			1 o minus 20 =		*		1 [X \$ 25 =		OR	X \$ 50 =		
INDEPENDENT CLAIMS			, minus 3 = .		*		1 [X \$ 100 =		OR	X \$ 200 =		
MULTIPLE DEPENDENT CLAIM PRE			ESENT				1	+ \$ 180 =		OR	+ \$ 360 =		
* If	the difference	in column 1 is l	ess than z	ero, enter "()" in co	lumn 2		TOTAL		OR	TOTAL	900	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							- r	SMALL EI	NTITY	OR	OTHER T		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total .	*	Minus	**		=] [X \$ 25 =		OR	X \$ 50 =		
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRES	SENTATION OF M	IULTIPLE D	EPENDENT (CLAIM] [+ \$ 180 =		OR	+ \$ 360 =		
					`	,	-4	TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF		
(Column 1) (Column 2) (Column 3)													
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	I	
TOTAL ADDIT. FFF OR TOTAL ADDIT. FFF													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													